



November 19, 2004

To: Carolyn Beck
USPTO, Art Unit 3626
fax 703 746 8374
11 pages including cover letter

Subject: Copy of response to office action mailed December 21, 2004 re application 10/743,201

Dear Examiner Beck,


Please disregard my earlier fax today. Some of the letters in the top line of some pages were cut off.

Attached please find a copy of the response to office action mailed to the USPTO on December 21, 2004 regarding application 10/743,201, "Method of Calculating Premium Payment to Cover the Risk Attributable to Insureds Surviving a Specified Period".

We appreciate your courtesy of scanning this into the system to expedite examination.

If you have any questions, please feel free to call me at 203 975 7678.

Regards,



Mark Nowotarski
Reg. No. 47,828

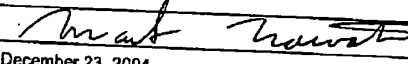
30 Glen Terrace, Stamford, CT 06906
tel 203.975.7678 fax 203.973.0010
mnowotarski@marketsandpatents.com

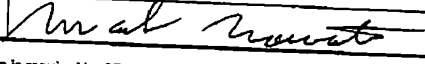
PTO/SB/21 (04-04)
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| | | | |
|---|----------------------|-----------------------------|---------------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 10/743201 | |
| | Filing Date | Dec 22, 2003 | |
| | First Named Inventor | Parankirinathan, Kiritharan | |
| | Art Unit | 3626 | |
| | Examiner Name | Carolyn Beck | |
| Total Number of Pages in This Submission | 10 | Attorney Docket Number | LPD092603USNP |

| ENCLOSURES (Check all that apply) | | |
|--|---|---|
| <input type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> After Allowance communication to Technology Center (TC) |
| <input type="checkbox"/> Fee Attached | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input checked="" type="checkbox"/> Amendment / Reply | <input type="checkbox"/> Petition | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Terminal Disclaimer | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Request for Refund | |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> CD, Number of CD(s) _____ | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | Remarks | |
| <input type="checkbox"/> Response to Missing Parts/Incomplete Application | reply post card | |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | |
|--|---|
| Firm or Individual name | Markets, Patents & Alliances LLC |
| Signature |  |
| Date | December 23, 2004 |

| CERTIFICATE OF TRANSMISSION/MAILING | |
|---|---|
| I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. | |
| Typed or printed name | Mark Nowotarski |
| Signature |  |
| Date | December 23, 2004 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

In you need assistance in completing the form, call 1-800-PTO-8199 and select option 2.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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| Applicant(s): Parankirinathan | |
| Application No.: 10/743201 | Art Unit: 3626 |
| Filed: 12/22/2003 | Examiner: Carolyn Beck |
| Title: Method of Calculating Premium Payment to Cover the Risk Attributable to Insureds Surviving a Specified Period | |
| Attorney Docket No.: LPD092603USNP | |
| Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 | Date: Dec 21, 2004 Express Mail ER 800 751 647 US |

RESPONSE UNDER 37 CFR 1.111

Dear Examiner:

In response to the Office Action of November 12, 2004, please amend this application as follows:

C:\mark2\LPD kiri\LPD092603USNP\Response Under 37 CFR 1 lpd092603USNP 12 21 04 as filed.doc
Title: Method of Calculating Premium Payment to Cover the Risk Attributable to Insureds Surviving a Specified Period.
Agent: Mark Nowotarski, Reg. No. 47,828
Docket: LPD022603USNP